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CONFIRMATION NO. 7619

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/016,119	<b>FILING OR 371(c) DATE</b> 12/17/2001 <b>RULE</b>	<b>CLASS</b> 455	<b>GROUP ART UNIT</b> 2685	<b>ATTORNEY DOCKET NO.</b> 850-19	
<b>APPLICANTS</b> James A. Green SR., Tallahassee, FL; Austin S. Coker JR., Tallahassee, FL;					
<b>** CONTINUING DATA *****</b> This application is a CON of 09/621,464 07/21/2000 PAT 6,334,045 and is a CON of 09/001,484 12/31/1997 PAT 6,122,482 which is a CIP of 08/838,677 04/09/1997 PAT 5,805,975 which is a CIP of 08/394,234 02/22/1995 ABN					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 04/05/2002</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 35	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 23117					
<b>TITLE</b> SATELLITE BROADCAST RECEIVING AND DISTRIBUTION SYSTEM					
<b>FILING FEE RECEIVED</b> 1128	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		